

*This portion MUST be returned with your payment to ensure proper credit. THANK YOU*

ACCOUNT BILLED
CEDARSTROM CALCITE

PROJECT NAME
CEDARSTROM CALCITE MINE

PROJECT ID
S490012

DUE DATE
07/28/2000

ANNUAL FEE
\$ 100

AMOUNT DUE
\$ 100

TAX ID OR SOCIAL SECURITY #

<input type="checkbox"/> FEE NOT ENCLOSED
Permittee requests an inspection to close out this permit.

DIVISION OF OIL GAS AND MINING  
1594 WEST NORTH TEMPLE SUITE 1210  
PO BOX 145801  
SALT LAKE CITY UT 84114-5801

<i>Change of Address</i>	
Contact	_____
Address	_____
_____	_____
_____	_____
State	Zip
Phone	_____

*Please make check payable to:*  
**Division of Oil, Gas and Mining**